

# DSA ACADEMY REGISTRATION FORM

## Instructions:

1. Print this form.
2. Complete one form for each person. All information is required.
3. Make check payable to the **Division of the State Architect** and mail to:

DSA ACADEMY  
ATTN: REGISTRATION COORDINATOR  
1102 Q STREET, SUITE 5100  
SACRAMENTO, CA 95814

4. Registration will be accepted up to two weeks before the start of class, if space is available.
5. A confirmation notice will be e-mailed to you (or mailed if you do not have an e-mail address).
6. The class facilities are accessible to the disabled. Please direct requests for special accommodations to the DSA Academy Registration Coordinator at (916) 323-4252 at least two weeks before the class date.

Circle One: Mr. / Ms. / Dr.

First Name:

Last Name:

Business/Organization Name:

Street Address:

City:

State:

Zip:

County:

Primary Phone: ( )

Alternate Phone: ( )

E-mail Address:

AIA Membership Number (if applicable):

Class Title	City	Start Date	Earn EUs/CEUs?			Fee
			ACIA	AIA	ICC	
Amount Enclosed:						\$

## Cancellation Policy:

If you cannot attend this class, please notify us at least 48 hours before the class start time. If you notify us, we'll give you a class credit or issue a refund. If you don't notify us or just don't show up, you'll be considered a "no show" and will forfeit your payment.